Introduced by Senator Scott

February 22, 2006

An act to amend Section 14132.88 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

SB 1403, as amended, Scott. Medi-Cal: dental restoration documentation requirements.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services and under which qualified low-income person persons and other eligible persons are provided health care services.

Under existing law, specified dental services are included as covered benefits under the Medi-Cal program, subject to utilization controls.

Existing law requires the department to require, under specified circumstances, pretreatment radiograph documentation on posttreatment claims for dental restorations.

This bill would specify that *the above* requirement does not apply to certain beneficiaries who are under 4 years of age or are developmentally disabled.—the *The* bill would also specify how the documentation requirements may be met.

Existing law authorizes the department to implement the requirements for that documentation by means of a provider bulletin or similar instruction, without taking regulatory action.

This bill would, instead, require the department to implement those requirement requirements by that means.

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Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 14132.88 of the Welfare and 2 Institutions Code is amended to read:
- 3 14132.88. (a) Notwithstanding subdivision (h) of Section 4 14132 and to the extent funds are made available in the annual 5 Product Act for this graph and the following are accounted by a few sections and the following are second by a few sections are second by a few sections and the few sections are second by a few sections and the few sections are second by a few sections are sections.
- Budget Act for this purpose, the following are covered benefitsfor beneficiaries 21 years of age or older under this chapter:
- 7 (1) One dental prophylaxis cleaning per year.
- 8 (2) One initial dental examination by a dentist.
- 9 (b) The following are covered benefits for beneficiaries under 10 21 years of age under this chapter:
 - (1) Two dental prophylaxis cleanings per year.
 - (2) Two periodic dental examinations per year.
 - (c) For persons 21 years of age or older, laboratory-processed crowns on posterior teeth are not a covered benefit except when a posterior tooth is necessary as an abutment for any fixed or removable prosthesis.
 - (d) Any prefabricated crown made from ADA-approved materials may be used on posterior teeth and may be reimbursed as a stainless steel crown.
 - (e) The department shall reduce the rate of subgingival curettage and root planing by 41 percent for all beneficiaries except those residing in a skilled nursing facility or an intermediate care facility for the developmentally disabled. Notwithstanding Section 14105 and Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement this subdivision by means of a provider bulletin or similar instruction, without taking regulatory action.
 - (f) (1) The department shall require pretreatment radiograph documentation on posttreatment claims to establish the medical necessity for dental restorations. The pretreatment documentation required under this subdivision is intended to reduce fraudulent claims for unnecessary dental fillings. In order to avoid any undue barriers to accessing dental care, the department shall stipulate that the pretreatment radiograph documentation for

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posttreatment claims will be required only when there are four or more dental fillings being completed in any 12-month period.

- (2) Paragraph (1) does not apply to any beneficiary who is under four years of age or who is documented by a licensed medical professional as being developmentally disabled, regardless of age.
- (3) Documentation requirements for treatment under this subdivision, and for purposes of audit by the department, shall be met by a statement recorded in the beneficiary's dental record stating why radiograph documentation establishing medical necessity for dental treatment could not be completed and photographs that show an abnormal medical condition requiring dental restorations or radiographs contained in the beneficiary's file that establish the medical necessity for dental restorations. Radiographs or photographs that indicate cavities on any tooth surface shall be considered sufficient documentation to establish the medical necessity for dental restorations.
- 18 (4) Notwithstanding Chapter 3.5 (commencing with Section 19 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department shall implement this subdivision by means of a provider bulletin or similar instruction, without taking regulatory action.